



81646

PATENT  
Attorney Docket No. MIT-103

TECH CENTER 16002300

FEB 04 2002


RECEIVED

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANTS: Kawasaki et al.  
SERIAL NO.: 09/422,999 GROUP NO.: 1646  
FILING DATE: October 22, 1999 EXAMINER: Murphy J.  
TITLE: Genes Integrating Signal Transduction Pathways

CERTIFICATE OF FIRST CLASS MAILING UNDER 37 C.F.R. 1.8

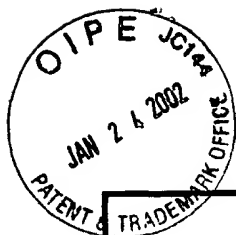
I hereby certify that this correspondence, and any document(s) referred to as enclosed herein, is/are being deposited with the United States Postal Service as first class mail, postage prepaid, in an envelope addressed to Commissioner for Patents, Washington, DC 20231 on this 26th day of December, 2001.

  
Wendy Martin

Commissioner for Patents  
Washington, D.C. 20231

Sir:

Submitted herewith are Transmittal Form (1 page); Fee Transmittal (1 page); Amendment and Response (14 pgs.); Petition for 2-Month Extension of Time (1 pg.); check in the amount of \$200.00 and a Return Receipt Postcard.



# TRANSMITTAL FORM

Application Serial Number	09/422,999
Filing Date	10/22/99
First Named Inventor	Kawasaki
Group Art Unit	1646
Examiner Name	Murphy, J.
Attorney Docket No.	MIT-103

TECH CENTER 16002300

FEB 04 2002

RECEIVED

## ENCLOSURES (check all that apply)

- |  |  |  |
|--|--|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form<br><input checked="" type="checkbox"/> Check Attached<br><input type="checkbox"/> Copy of Fee Transmittal Form  | <input type="checkbox"/> Copy of Notice to File Missing Parts of Application (PTO-1553)                                      | <input type="checkbox"/> Appeal Communication to Board of Patent Appeals and Interferences |
| <input checked="" type="checkbox"/> Amendment/Response<br><br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets _____] | <input type="checkbox"/> Formal Drawing(s)   | <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) |
| <input checked="" type="checkbox"/> Extension of Time Request  | <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition to Convert to a Provisional Application | <input type="checkbox"/> Status Letter   |
| <input type="checkbox"/> Information Disclosure Statement Form PTO-1449  | <input type="checkbox"/> Power of Attorney (Revocation of Prior Powers)  | <input checked="" type="checkbox"/> Return Receipt Postcard                                |
| <input type="checkbox"/> Copies of IDS Citations   | <input type="checkbox"/> Terminal Disclaimer   | <input checked="" type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8 |
| <input type="checkbox"/> Certified Copy of Priority Document(s)  | <input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application                 | <input type="checkbox"/> Additional Enclosure(s) (please identify below)                   |
| <input type="checkbox"/> Response to Missing Parts/ Incomplete Application   | <input type="checkbox"/> Small Entity Statement  |  |
|  | <input type="checkbox"/> Request for Refund  |  |
|  | <input type="checkbox"/> After Allowance Communication to Group  |  |

## CORRESPONDENCE ADDRESS

Direct all correspondence to: Patent Administrator  
Testa, Hurwitz & Thibault, LLP  
High Street Tower  
125 High Street  
Boston, MA 02110  
Tel. No.: (617) 248-7000  
Fax No.: (617) 248-7100

## SIGNATURE BLOCK

Respectfully submitted,  
  
Date: 12/26/01  
Reg. No. 48,526  
Tel. No.: (617) 248-7476  
Fax No.: (617) 248-7100  
Jennifer A. Camacho  
Attorney for Applicant(s)  
Testa, Hurwitz & Thibault, LLP  
High Street Tower  
125 High Street  
Boston, MA 02110



# FEE TRANSMITTAL FY 2002

Complete if Known

Application Serial Number	09/422,999
Filing Date	10/22/99
First Named Inventor	Kawasaki
Group Art Unit	1646
Examiner Name	Murphy, J.
Attorney Docket No.	MIT-103

RECEIVED  
FEB 06 2002

FROM OFFICE OF THE PATENT & TRADEMARK OFFICE

METHOD OF PAYMENT				FEE CALCULATION (continued)																																																																																			
<p>1. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other</p>				<p>3. ADDITIONAL FEES</p> <table><thead><tr><th>Large Entity Fee (\$)</th><th>Small Entity Fee (\$)</th><th>Fee Description</th><th>Fee Paid</th></tr></thead><tbody><tr><td>130</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr><tr><td>50</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr><tr><td>130</td><td>130</td><td>Non-English specification</td><td></td></tr><tr><td>2,520</td><td>2,520</td><td>Request for ex parte reexamination</td><td></td></tr><tr><td>110</td><td>55</td><td>Extension for reply within first month</td><td></td></tr><tr><td>400</td><td>200</td><td>Extension for reply within second month</td><td>200.00</td></tr><tr><td>920</td><td>460</td><td>Extension for reply within third month</td><td></td></tr><tr><td>1440</td><td>720</td><td>Extension for reply within fourth month</td><td></td></tr><tr><td>1960</td><td>980</td><td>Extension for reply within fifth month</td><td></td></tr><tr><td>320</td><td>160</td><td>Notice of Appeal</td><td></td></tr><tr><td>320</td><td>160</td><td>Filing a brief in support of an appeal</td><td></td></tr><tr><td>280</td><td>140</td><td>Request for oral hearing</td><td></td></tr><tr><td>130</td><td>130</td><td>Petitions to the Commissioner</td><td></td></tr><tr><td>180</td><td>180</td><td>Submission of Information Disclosure Statement</td><td></td></tr><tr><td>740</td><td>370</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td></td></tr><tr><td>740</td><td>370</td><td>For each additional invention to be examined (37 CFR 1.129(b))</td><td></td></tr><tr><td>100</td><td>100</td><td>Certificate of Correction for applicant's error</td><td></td></tr><tr><td colspan="2">Other fee (Specify)</td><td colspan="2"></td></tr><tr><td colspan="2">Other fee (Specify)</td><td colspan="2"></td></tr></tbody></table>				Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid	130	65	Surcharge - late filing fee or oath		50	25	Surcharge - late provisional filing fee or cover sheet		130	130	Non-English specification		2,520	2,520	Request for ex parte reexamination		110	55	Extension for reply within first month		400	200	Extension for reply within second month	200.00	920	460	Extension for reply within third month		1440	720	Extension for reply within fourth month		1960	980	Extension for reply within fifth month		320	160	Notice of Appeal		320	160	Filing a brief in support of an appeal		280	140	Request for oral hearing		130	130	Petitions to the Commissioner		180	180	Submission of Information Disclosure Statement		740	370	Filing a submission after final rejection (37 CFR 1.129(a))		740	370	For each additional invention to be examined (37 CFR 1.129(b))		100	100	Certificate of Correction for applicant's error		Other fee (Specify)				Other fee (Specify)			
Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid																																																																																				
130	65	Surcharge - late filing fee or oath																																																																																					
50	25	Surcharge - late provisional filing fee or cover sheet																																																																																					
130	130	Non-English specification																																																																																					
2,520	2,520	Request for ex parte reexamination																																																																																					
110	55	Extension for reply within first month																																																																																					
400	200	Extension for reply within second month	200.00																																																																																				
920	460	Extension for reply within third month																																																																																					
1440	720	Extension for reply within fourth month																																																																																					
1960	980	Extension for reply within fifth month																																																																																					
320	160	Notice of Appeal																																																																																					
320	160	Filing a brief in support of an appeal																																																																																					
280	140	Request for oral hearing																																																																																					
130	130	Petitions to the Commissioner																																																																																					
180	180	Submission of Information Disclosure Statement																																																																																					
740	370	Filing a submission after final rejection (37 CFR 1.129(a))																																																																																					
740	370	For each additional invention to be examined (37 CFR 1.129(b))																																																																																					
100	100	Certificate of Correction for applicant's error																																																																																					
Other fee (Specify)																																																																																							
Other fee (Specify)																																																																																							
<p>2. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 20-0531. <input type="checkbox"/> Required Fees (copy of this sheet enclosed). <input checked="" type="checkbox"/> Additional fee required under 37 CFR 1.16 and 1.17. <input checked="" type="checkbox"/> Overpayment Credit.</p>																																																																																							
<p>3. <input checked="" type="checkbox"/> Applicant claims small entity status.</p>																																																																																							
<p><b>FEE CALCULATION</b></p>																																																																																							
<p>1. FILING FEE</p> <table><thead><tr><th>Large Entity Fee (\$)</th><th>Fee Description</th><th>Fee Paid</th></tr></thead><tbody><tr><td>740</td><td>Utility filing fee</td><td></td></tr><tr><td>330</td><td>Design filing fee</td><td></td></tr><tr><td>160</td><td>Provisional filing fee</td><td></td></tr></tbody></table> <table><thead><tr><th></th><th>Number Filed</th><th>Number Extra</th><th>Rate</th><th>Amount</th></tr></thead><tbody><tr><td>Total Claims</td><td>- 20 =</td><td></td><td>x \$ 18.00 =</td><td></td></tr><tr><td>Independent Claims</td><td>- 3 =</td><td></td><td>x \$ 84.00 =</td><td></td></tr><tr><td colspan="4"><input type="checkbox"/> Multiple Dependent Claim(s), if any</td><td>\$280.00 =</td></tr><tr><td colspan="4">TOTAL:</td><td></td></tr><tr><td colspan="4">SMALL ENTITY DISCOUNT:</td><td></td></tr><tr><td colspan="4">SUBTOTAL (1)</td><td>(\$)</td></tr></tbody></table>				Large Entity Fee (\$)	Fee Description	Fee Paid	740	Utility filing fee		330	Design filing fee		160	Provisional filing fee			Number Filed	Number Extra	Rate	Amount	Total Claims	- 20 =		x \$ 18.00 =		Independent Claims	- 3 =		x \$ 84.00 =		<input type="checkbox"/> Multiple Dependent Claim(s), if any				\$280.00 =	TOTAL:					SMALL ENTITY DISCOUNT:					SUBTOTAL (1)				(\$)																																					
Large Entity Fee (\$)	Fee Description	Fee Paid																																																																																					
740	Utility filing fee																																																																																						
330	Design filing fee																																																																																						
160	Provisional filing fee																																																																																						
	Number Filed	Number Extra	Rate	Amount																																																																																			
Total Claims	- 20 =		x \$ 18.00 =																																																																																				
Independent Claims	- 3 =		x \$ 84.00 =																																																																																				
<input type="checkbox"/> Multiple Dependent Claim(s), if any				\$280.00 =																																																																																			
TOTAL:																																																																																							
SMALL ENTITY DISCOUNT:																																																																																							
SUBTOTAL (1)				(\$)																																																																																			
<p>2. AMENDMENT CLAIM FEES</p> <table><thead><tr><th>Claims Remaining After Amend.</th><th>Highest No. Previously Paid For</th><th>Present Extra</th><th>Rate</th><th>Fee Paid</th></tr></thead><tbody><tr><td>Total</td><td>-</td><td>=</td><td>x \$ 18.00 =</td><td></td></tr><tr><td>Indep.</td><td>-</td><td>=</td><td>x \$ 84.00 =</td><td></td></tr><tr><td colspan="4"><input type="checkbox"/> First Presentation of Multiple Dep. Claim</td><td>+ \$280.00 =</td></tr><tr><td colspan="4">TOTAL:</td><td>(\$)</td></tr><tr><td colspan="4">SMALL ENTITY DISCOUNT:</td><td>(\$)</td></tr><tr><td colspan="4">SUBTOTAL (2)</td><td>(\$)</td></tr></tbody></table>				Claims Remaining After Amend.	Highest No. Previously Paid For	Present Extra	Rate	Fee Paid	Total	-	=	x \$ 18.00 =		Indep.	-	=	x \$ 84.00 =		<input type="checkbox"/> First Presentation of Multiple Dep. Claim				+ \$280.00 =	TOTAL:				(\$)	SMALL ENTITY DISCOUNT:				(\$)	SUBTOTAL (2)				(\$)	<p>SUBTOTAL (3) (\$ 200.00)</p> <p>SUBTOTAL (1) 0.00 SUBTOTAL (2) 0.00 SUBTOTAL (3) 200.00</p> <p>TOTAL (\$ 200.00)</p>																																																
Claims Remaining After Amend.	Highest No. Previously Paid For	Present Extra	Rate	Fee Paid																																																																																			
Total	-	=	x \$ 18.00 =																																																																																				
Indep.	-	=	x \$ 84.00 =																																																																																				
<input type="checkbox"/> First Presentation of Multiple Dep. Claim				+ \$280.00 =																																																																																			
TOTAL:				(\$)																																																																																			
SMALL ENTITY DISCOUNT:				(\$)																																																																																			
SUBTOTAL (2)				(\$)																																																																																			
<p><b>CORRESPONDENCE ADDRESS</b></p> <p>Direct all correspondence to: Patent Administrator Testa, Hurwitz &amp; Thibault, LLP High Street Tower-125 High Street Boston, MA 02110 Tel. No.: (617) 248-7000 Fax No.: (617) 248-7100</p>				<p><b>SIGNATURE BLOCK</b></p> <p>Respectfully submitted,  Date: 12/26/01 Reg. No.: 43,526 Tel. No.: 617-248-7476 Fax No.: (617) 248-7970 Jennifer A. Camacho Attorney for the Applicants Testa, Hurwitz &amp; Thibault, LLP High Street Tower-125 High Street Boston, MA 02110</p>																																																																																			